

Vaginal hysterectomy

These instructions are intended for printing. The instructions contain sections to be filled in.

Hysterectomy is necessary for the treatment of various diseases of the womb and reproductive system. The most common cause for a hysterectomy is a fibroid, which is a benign tumour in the wall of the womb. Other diseases treated by hysterectomy include, for example, ones that cause pain and heavy menstrual flow, the preliminary stages of malignant changes in the womb and cancerous tumours in the womb and ovaries. If both ovaries are removed due to a disease, the womb is usually removed at the same time.

Procedure

The procedure is usually performed under a spinal block or general anaesthesia. Usually the whole womb is removed. Sometimes circumstances during the procedure make it necessary to change plans, and a hysterectomy intended to be performed through the vagina or as laparoscopic surgery, also known as keyhole surgery, may have to be performed as an open abdominal hysterectomy instead.

Recovery

After a hysterectomy, you will no longer have menstrual periods. Pregnancy is no longer possible, which is why contraception is not needed. After you have fully recovered, there are no restrictions on your sex life, and the surgery does not affect your ability to enjoy sex.

After the procedure, your recovery will be monitored for a few hours. You will be able to go home when you are able to urinate. During your sick leave, you must avoid exertion, lifting things, bending down, shaking rugs, reaching for things, cycling and sitting down for long periods of time. You also need to avoid pushing when emptying your bowels; you may use over-the-counter laxatives for a short time. Preventing constipation will be important in the future at any rate.

Wound care

The wound has dissolvable stitches that do not need to be removed. From the day after the procedure onwards, you will need to wash your genital area at least once in the morning and before bed. You can go to sauna one week after the procedure. To reduce the risk of inflammation, avoid sexual intercourse, swimming, baths and tampons for two weeks after the procedure. You may have slight vaginal spotting or bleeding for a few weeks after the surgery. After that, the wounds will gradually heal.

Pain management

We recommend you take painkillers regularly for one to four days and after that as needed:

Paracetamol

Anti-inflammatory painkiller

Strong painkiller

Other medicine

Sick leave is three to four weeks. If a follow-up check is considered necessary, arrangements will be made for it separately before you are discharged from hospital.

Contacting us

If you have any symptoms of inflammation (fever, severe pain, profuse or bad-smelling discharge) or anything else that worries you, contact:

Gynaecological outpatient clinic on weekdays 14.00–15.00, telephone 06 213 2012,

Day Surgery Unit on weekdays 07.00–15.00, telephone 06 213 1552

Your own health Centre or occupational health unit

Telephone nursing services from 15.00–08.00 on Monday–Thursday and from 14.00–08.00 on Friday and 24 hours a day during weekends and on midweek holidays, telephone 116 117

Vaasa Hospital District • www.vaasankeskussairaala.fi/en • Telephone 06 213 1111

This instruction is intended for our patients who are in care relationship.